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12/22/2005 EWILLIAM 00000001 501417 10766022

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

501.43385XID

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			15					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE		
TC	TAL CHARGE	ABLE CLAIMS	15 mi	inus 20=	•			XS 9≈		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = *			•		X43=		OR	X86=		
MU	ILTIPLE DEPE	NDENT CLAIM P	RESENT			. 🗆		+145=		7	+290=		
* If the difference in column 1 is less than zero, enter "0" in c						column 2	l	TOTAL	 	OR OR	TOTAL	730	
CLAIMS AS AMENDED - PART II							OTHER THAN						
		(Column 1)	(Column 2) (Column 1) (Column 2)			(Column 3)) <u>-</u>	SMALL	ENTITY	OR	SMALL		
AMENDMĘNT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	.16	Minus	- 70	6	. —		X\$ 9=		OR	X\$18=		
AME	Independent	* (Minus	IPLE DEPENDENT		- 3		X43=		OR	XB6=	600	
	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=		
	•	•				•	L	TOTAL			TOTAL	1 - 7000	
		(Column 1)		(Colum	n 2)	(Column 3)	. *	DDIT. FEE			ADDIT. FEE	21/70	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON I	Total	•	Minus	**		-		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		= ,	r	X43=		OR	X86=		
·	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM]	r	+145=		OR	+290=		
				•			AI	TOTAL ODIT. FEE		OR ,	TOTAL ODIT, FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)	·			•.		,	
AMENDMENT C		REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<u> </u>	Γ	X\$ 9=		OR	X\$18=		
AME.	Independent	•	Minus	***		•	广	X43=		OR	X86=		
	ringi Priese	NTATION OF MU	LIPLE DEP	ENDENT (CLAIM	للب		+145=		ı		-	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is 1 ss than 20, enter "20."								TOTAL		OR L	+290= TOTAL		
11		INCO CONTRACTO PA			~~ *	" ACT AND A " "		DIT. FEE					